



INP / APN NETWORK

BULLETIN

International Council of Nurses • Conseil international des infirmières • Consejo internacional de enfermeras
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Editor: Andrea Renwanz Boyle, PhD, FNAP

**Core Steering Group Liaison:
Andrea Renwanz Boyle, PhD**

Up-date from the Chair: Melanie Rogers

Welcome to the October bulletin. It's been a busy time for the Network. Our Sub Groups are all occupied with a number of activities including writing Advanced Practice country profiles, developing research competencies, writing briefs on health policy and educational issues. If you would like to join any of these groups, please visit our web site for details. We have also published an article about the research we conducted on job satisfaction. This can be found in the *International Nursing Review* (Steinke, M., Rogers, M., Lehwaldt, D. and Lamarche, K. (2017) '[An examination of nurse practitioners/advanced practice nurses' job satisfaction internationally](#)' *International Nursing Review*). We are hoping to replicate this study with a larger cohort in the future. One of our Alumni and founding members of the Network, Madrean Schober also published *Strategic Planning for Advanced Nursing Practice* (Springer) this year which is well worth a read.



I have had the pleasure of visiting Hungary several times this year to support them as they develop advanced practice roles. This is a very exciting development which Orsolya Maté has written about in the bulletin. Other countries have also written to us for our support in developing these roles and we are committed to offering support and advice as able. We had the opportunity at the ICN Congress in May to meet with many nurses, educators, researchers and policy makers at our Network meeting which attracted over 200 delegates. We heard about developments in Cyprus, Mauritius, Barbados and a number of other countries. Many of these nurses talked about their isolation in pioneering advanced practice groups and were excited to be able to join the Network. If you know of any pioneering roles, do consider writing to us about them for inclusion in the Bulletin.

I have included some photos of Network members at the ICN Congress which was held in Barcelona in May. It was a wonderful opportunity to hear about nursing developments and practices across the globe as well as the ICN's ongoing vision. To be with so many nurses, hearing the many varied experiences and passion for their vocation was inspiring. It was also a great opportunity to see many Network members and talk about our ongoing vision. One of our aims this year is to develop a Student Sub Group so please do get in touch if this is of interest.

Please keep in touch with us via our social media accounts on facebook and twitter:

Facebook: ICN Nurse Practitioner/Advanced Practice Nurse Network

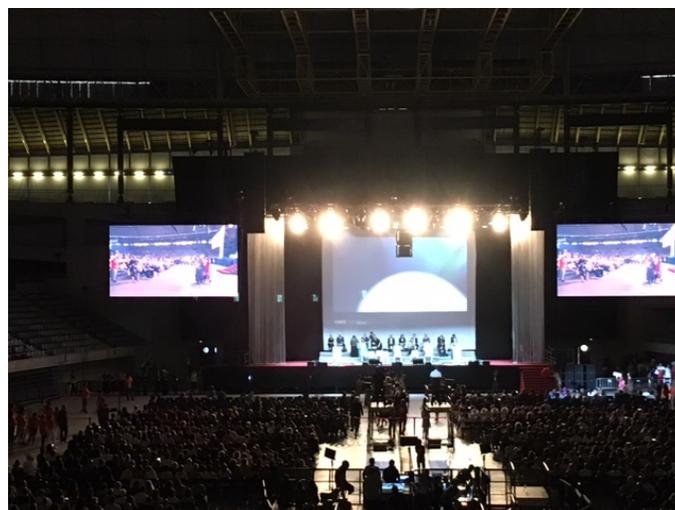
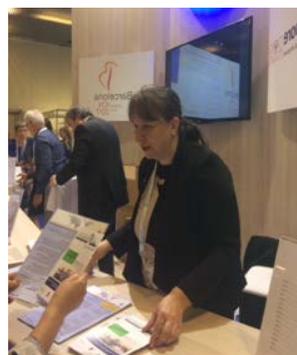
Twitter: @ICNGLOBALAPN

As usual, I am committed to working together to develop our Network. Please do contact me directly at: M.Rogers@hud.ac.uk if you have any ideas or thoughts about the ongoing vision of the Network

I hope to see many of you next year at our next Network conference in Rotterdam. Abstracts and bookings are now open via <http://www.npapr2018.com/>

Very best wishes,

Dr Melanie Rogers Chair



New Core Steering Group, Alumni and Sub Group Members

Biographies:

Beverley Bird from Australia has joined the Core Steering Group as Liaison to the Research Sub-Group. She has practiced as a Nurse Practitioner in the USA and Australia and has taught in Australia, China and Hong Kong as a faculty member of the Monash University Faculty of Medicine, Nursing and Health Sciences (FMNHS). She is currently an Adjunct Lecturer with Monash University, FMNHS and JCU College of Medicine and Dentistry.

Debbie Leach from New Zealand is the new Chair of the Practice Subgroup. Debbie is a Nurse Practitioner Prescriber in Primary Health Care across the Lifespan and Mental Health setting. She serves as an integral member of a broader New Zealand multidisciplinary health care team (Tararua Health Group [THG]). She is involved in delivering a reputable Integrated Family Healthcare Service to a diverse population. . Outside of THG and nationally Debbie consults for the Nursing Council of New Zealand as a panelist to assess Nurse Practitioner Candidates; and for Massey University (across 3 cities) marking post-graduate pharmacology papers.

Lorna Schumann, PhD, FNP-C, ACNP-BC, ACNS-BC, ENP-C, CCRN-C, FAAN, FAANP from the USA is moving from her role as Co-Chair of the Research Subgroup to the Alumni. She has been involved with the International Council of Nurses since 1989 and with the ICN Advanced Practice Network since 2000. Lorna is an advocate for advanced practice nursing globally, assisting in curriculum development, teaching and clinical practice. She has provided health care in numerous countries with low medical resources since 1990.

Li Gao, MSN, NP from the USA is the Chair of the Fundraising Subgroup which raises funds to help Network members from developing countries to attend the Network Conferences. She works at the University of Michigan Health System and has been clinical preceptor for NP graduate students. She has been a subcommittee member of the NP/APN network since 2008.

International Report: Hungary:

Establishing an Advance Practice Nurse MSc. Program (Nurse Practitioner) with six specialties in Hungary

Orsolya Máté, József Betlehem, András Oláh

In Hungary, nursing tertiary education is structured as follows: (1) Bachelor of Nursing (4 years education, 240 credits); (2) Master of Nursing (3 semester education, 90 credits). In 2000, the University of Pécs, Faculty of Health Sciences established the Master of Nursing education programme. This programme was the first in the country established with the goals of: training health care professionals familiar with the functioning and tasks of health care within a national context; offering an institutional system of nursing at middle and higher levels; and offering role and development possibilities for health science within the life of society. The initial programme was focused on leadership, management and research roles and prepared nurses at Masters level for administrative, management and leadership functions. The Institute of Nursing Science of the same faculty used international criteria to replace the former Master of Nursing programme and established a new Masters prepared nursing programme for Advanced Practice Registered Nurse (Nurse Practitioner) roles. The role was entitled APRN/NP and included six specialty areas.

2016 was a truly historical year for Hungary and for Hungarian nurses as legislative decree clearly regulated Hungarian competencies of Advanced Practice Nurses, bringing the APRN as definition and role to life within Hungary (available in Hungarian: <http://www.kozlonyok.hu/nkonline/MKPDF/hidteles/MK16116.pdf>).

Beginning in September 2017, Hungary will launch several of the following specifications of the APN, within Nurse Practitioner training programmes including: Nurse Anesthetist; Primary Care Nurse Practitioner; Emergency Care Nurse Practitioner; Acute Care Nurse Practitioner; Geriatric Nurse Practitioner; and Perioperative Nurse Practitioner.

In the first semester of 2017, several APRN students will start their Master of Nursing (APRN/NP)

education in three Hungarian universities. Students will plan to complete this programme successfully within a three-semester long programme. The entry requirement into the programme is the Bachelor of Nursing degree for all specialisations; only in the case of Emergency Care Nurse Practitioner will the Bachelor of Pre-hospital Care also be accepted. The training programmes have been defined, so that that trained professionals should meet criteria as defined by ICN: "A Nurse Practitioner/Advanced Practice Nurse is a registered nurse who has acquired the expert knowledge base, complex decision-making skills and clinical competencies for expanded practice, the characteristics of which are shaped by the context and or country in which s/he is credentialed to practice. A Master's degree is recommended for entry level "(ICN, 2008).

The scope of practice of APRN/Nurse Practitioners in Hungary also meets international standards. By legislative decree APRN/Nurse Practitioners are competent to perform the following skills in selected role areas.

1. Nurse Anesthetist:

Independent compilation of treatment plans, ordering and analysis of laboratory and imaging tests, as well as the performance of specialist nursing and patient education tasks, independent selection of methods of anesthesia and the medicinal products to be used during anesthesia, independent performing of anesthesia, performing advanced airway management techniques, securing airways using supraglottic or infraglottic techniques, performing peripheral venous catheter insertion or intraosseous cannulation, arterial puncture and cannulation, performing chest decompression, performing preparation and implementation tasks related to blood transfusion therapies, performing invasive interventions, such as intubation using a bronchofiberscope, defibrillation therapy, cardioversion, pacemaker therapy and ALS.

2. Geriatric Nurse Practitioner

Working independently in a practice engaged in community nursing, managing independently chronic gerontological diseases (e.g. hypertension, diabetes mellitus, hyperlipidaemia), including the performance of detailed physical patient examinations, formulating of preliminary diagnosis, the independent compilation of treatment plans, ordering and analyzing of laboratory and imaging tests, referral to physicians, as well as the ordering and implementation of therapies, and

the performing of specialist nursing and patient education tasks, carrying out preventive examinations and in the case of acute events, after primary care, referring patients to specialist out-patient clinics and ordering and prescribing vaccines, compiling complex rehabilitation (diet therapy, physiotherapy, psychological and/or social) plans and coordinating the provision of adequate hospice.

3. Acute Care Nurse Practitioner

Managing diseases independently, compilation of independent treatment plans, ordering and analysis of laboratory and imaging tests, performing specialist nursing and patient education tasks, securing airways, using supraglottic or infraglottic techniques and, performing advanced airway management techniques, ordering and prescribing medicaments, performing chest decompression, abdominal drainage, chest drainage, performing dialysis therapy under supervision, performing peripheral venous catheter insertion or intraosseous cannulation, performing preparation and implementation tasks related to blood transfusion, performing invasive interventions, such as wound excision, debridement, applying wound suturing procedures, carrying out endotracheal intubation, defibrillation therapy, cardioversion and ALS.

4. Primary Care Nurse Practitioner

Formulation of preliminary diagnosis, compiling independent treatment plans, ordering and analysing laboratory and imaging tests, performing specialist nursing and patient education tasks, working independently in a practice engaged in community nursing, managing independently chronic diseases (e.g. hypertension, diabetes mellitus, hyperlipidaemia) affecting adult patients, referral to physicians, as well as the ordering and implementation of therapies, carrying out preventive examinations, ordering, prescribing vaccines, compiling complex rehabilitation (diet therapy, physiotherapy, psychological and/or social) plans, preparing individual health plans creating, implementing complex health promotion project.

5. Perioperative Nurse Practitioner

Compiling independent treatment plans, ordering and analysing laboratory and imaging tests, performing specialist nursing and patient education tasks, ordering medication therapy, carrying out the first assistant's tasks during various surgeries, to perform invasive procedures such as tissue

separation, saturation, use of clamps, use of tissue sealants, insertion and removal of laparoscopic trocars, insertion and removal of surgical drains, closure of extra-fascial wounds, preparation of limb veins, wound excision, debridement and wound treatment, ordering medicinal products used during surgeries or wound treatments, organisation tasks in operating theatres and ensure the optimal utilisation of operating theatres.

6. Emergency Nurse Practitioner

Independently managing symptom groups in pre- and intra-hospital emergency care, including initial health status assessment, evaluation of the results of detailed physical patient examinations, setting up of preliminary diagnosis, independent compilation of treatment plans, ordering and analyzing of laboratory and imaging tests, carrying out specialist nursing and patient education tasks, ordering medication therapy, modifying and/or supplement medication therapy in the case of chronic conditions, requesting consultation with physicians in the case of progressive diseases or those with a narrow time window, or critical conditions; in the case of conditions requiring immediate intervention, ordering analgesia, securing airways, using supraglottic or infraglottic techniques, performing chest decompression, abdominal drainage, thoracotomy, abdominal drainage, gastric lavage, intestinal lavage, limb and spine immobilisation, wound toilette, wound excision, wound closure, dialysis under supervision, performing, managing complex cardiopulmonary resuscitation or cardioversion start an external transthoracic pacemaker treatment, performing peripheral venous catheter insertion or intraosseous cannulation, arterial puncture and cannulation, where appropriate, central venous cannulation. (available in Hungarian: http://net.jogtar.hu/jr/gen/hjegy_doc.cgi?docid=A1600018.EMM×hift=ffffff4&xtreferer=0000001.TXT)

It has to be mentioned, that although the legislative decree makes the NP role possible, the current legal background does not ensure practice within this scope of the profession; this is being developed and will be modified in the coming months.

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10th ICN Nurse Practitioner/Advanced Practice Nurse Network in Rotterdam

We are delighted to announce that Abstract submission and registration is open for [the 10th ICN NP/APN Conference in Rotterdam](#), 26 -29 August 2018



*Bridging the gap
Advanced Nurse Practitioners: Main characters in
futuristic healthcare by collaborative leadership*

This international gathering of thousands of nurse practitioners and advanced practice nurses will explore nurses' leading role in the transformation of care, with a particular focus on universal health coverage, the Sustainable Development Goals and human resources for health.

Ageing of the population, the increasing prevalence of chronic diseases, climate change and the desire of patients to have a stronger voice in decisions about health, care, and services have an impact on the demand of care worldwide. The political and social debate invariably presents ageing and chronically ill as a problem with major implications for the affordability of healthcare. This is due to our current ideas about ageing, illness, and health, i.e. "ageing and chronically illness mean diseases and diseases need to be treated by a doctor." But is that the right paradigm? There is a need for a paradigm shift from a medical model to a bio psychosocial model in healthcare with shared decision making as opposed to paternalistic and informed decision-making. The chronically ill and elderly need help

to stay independently, to stimulate their wellness and to participate in society. That is why prevention and health promotion are so important to stimulate people to take responsibility for their health and increase self-management and empowerment. But there are other questions that also need to take responsibility such as risk management in acute care and mental health.

(Advanced) nurse practitioners, and clinical nurse leaders, with their broad scope in cure and care, are challenged to play an important role within this transition.

This integrated way of providing health care also means that co-creation is needed, i.e. collaboration between the health care professional and the patient, between the health care professional and the family and informal networks around the patient, between health care professionals with various backgrounds, and between institutes. However, transformative leadership and inter-professional collaboration are necessary to influence the (political) agenda and to empower patients and colleague-nurses. The leadership skills from advanced nurses are necessary to take responsibility in this changing health care landscape. But a main condition is a clear definition of Advanced Nursing Practice, legal registration and credentialing to offer safe and responsible care and cure.

Key dates

29 November 2017	Online submission of abstracts closes
28 February 2018	Deadline early bird fee
26 July 2018	Deadline regular fee

For more information:

www.npapn2018.com

The main goal of this conference is to make together the next step in developing advanced nursing worldwide for better and safer health care.